

Work Order ID 116946

April-24-14 8:43:16 AM

116946

Page 1

Item ID:	D3566-5	Accept	*N900040100*	Setup	Start	*NS1*	
Revision ID:							
Item Name:	Gasket Center Aft				Stop	*NS2*	
Start Date:	5/07/14	Start Qty:	12.00	*12*	Cust Item ID:		
Required Date:	5/07/14	Req'd Qty:	12.00	*12*	Customer:		
Reference:							
Approvals:	Process Plan: <u>MLJ</u>	Date: <u>14-04-25</u>	Tooling:	Date:	Run	Start	*NR1*
	QC: _____	Date: _____	SPC (Y/N): _____	Date: _____	Stop		*NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D3566	Rev C								
100		0.00							
100 Waterjet	FLOW WATER JET								
FLOW CNC Waterjet	Memo	0.00							
	1-Cut as per Dwg D3566 Dwg Rev: <u>C</u> Prog Rev: <u>C</u> 2- Deburr if necessary								
110	QC2- Inspect parts off machine FAI/FAIB	0.00							
110 QC	Memo	0.00							
Quality Control									
120	QC8- Inspect parts - second check	0.00							
120 QC	Memo	0.00	DAS 27 9-89						
Quality Control			14/5/14						

DQA:

Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed:

Date: _____

Work Order update only

Work Order: _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS						
Part No. _____ NCR No. _____				Rework Scrap Use-as-is Suspected Unapproved	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other				
Root Cause	Date	Step	Qty	Description of work order update or non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector	
Design Doc/Data Equip/Tooling Handling/Pre Material Operator Offset/Setup Process Supplier Training Transport Unapproved												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function			<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence			<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge			<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

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April-24-14 8:43:16 AM

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Page 2

Item ID: D3566-5

Accept

N900040100

Setup

Start *NS1*

Revision ID:

Item Name: Gasket Center Aft

Stop

NS2

Start Date: 5/07/14 **Start Qty:** 12.00

12

Cust Item ID:

Required Date: 5/07/14 **Req'd Qty:** 12.00

12

Customer:

Reference:

Approvals:

Process Plan: _____

Date: _____

Tooling: _____

Date: _____

Run

Start

NR1

QC: _____

Date: _____

SPC (Y/N): _____

Date: _____

Stop

NR2

**Sequence ID/
Work Center ID**

**Operation
Description**

**Set Up/
Run Hours**

Tool ID

Tool #

**Plan
Code**

**Accept
Qty**

**Reject
Qty**

**Reject
Number**

**Insp.
Stamp**

130

Identify as per dwg & Stock Location: PP-001

0.00

xlr d ll wl05/12

130

Packaging

Packaging

Memo

0.00

140

QC21- Final Inspection - Work Order Release

0.00

mlj 14-05-12

140

QC

Quality Control

Memo

0.00

mlf
14-5-12

DQA: _____ Date: _____

Date:



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Date:

Work Order update only

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
Part No. _____			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
NCR No. _____			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Suspected Unapproved <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause		Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Design	<input type="checkbox"/>										
Doc/Data	<input type="checkbox"/>										
Equip/Tooling	<input type="checkbox"/>										
Handling/Pre	<input type="checkbox"/>										
Material	<input type="checkbox"/>										
Operator	<input type="checkbox"/>										
Offset/Setup	<input type="checkbox"/>										
Process	<input type="checkbox"/>										
Supplier	<input type="checkbox"/>										
Training	<input type="checkbox"/>										
Transport	<input type="checkbox"/>										
Unapproved	<input type="checkbox"/>										
FAULT CATEGORY											
Landing Gear			General								
Bending	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Folio/Program	<input type="checkbox"/>	Outside Dimensions	<input type="checkbox"/>	Pressure/Forced	<input type="checkbox"/>		
Centre Not Concentric	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Set-up	<input type="checkbox"/>		
Cracks	<input type="checkbox"/>	Broken/Damage/Defect	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Temperature/Cure	<input type="checkbox"/>		
Crimp/Kink/Ripple/Wave	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Inspection Incomplete/Unqualified	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Weld	<input type="checkbox"/>		
Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>	Wrong Stock Pulled	<input type="checkbox"/>		
Crushing	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Misaligned/off center	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>		<input type="checkbox"/>		
Heat Treat	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>		<input type="checkbox"/>		
Inspection Strip in Tube	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Other	<input type="checkbox"/>		<input type="checkbox"/>		
Marks/Chatter	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Off-set	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		
Turning Sequence	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Calibration	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		
Wave/Twist in Tube	<input type="checkbox"/>	Fit/Function	<input type="checkbox"/>	Out of Sequence	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		

Picklist Print

Page 1

April-24-14 8:43:19 AM

Work Order ID: 116946

116946

D3566-5

Parent Item: D3566-5

Parent Item Name: Gasket Center Aft

Start Date: 5/07/14

Required Date: 5/07/14

Start Qty: 12.00

Required Qty: 12.00

Comments:

IPP Rev:A New Issue 07-03-08 ec
IPP Rev:B Added Drain Holes 07-07-09 JLM
IPP Rev:C As per Rev C 07-09-09 JLM Verified By:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MNEO60S.063		Purchased	No			100	sf	896.8000	1.06	15			

MNF060S 063

NEOPRENE SHEET 0.063

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
MAT052	896.8	
M126546	0.0	
M128266	0.0	
M128339	800	128339

**

Jm14-05-11

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only

Work Order: _____	DISPOSITION			AGAINST DEPARTMENT/PROCESS					
Part No. _____	Rework	<input type="checkbox"/>	Skid-tube	<input type="checkbox"/>	Crosstube	<input type="checkbox"/>	Water Jet	<input type="checkbox"/>	Engineering
NCR No. _____	Scrap	<input type="checkbox"/>	Machining	<input type="checkbox"/>	Small Fab	<input type="checkbox"/>	Prod. Eng. Coor.	<input type="checkbox"/>	Quality
	Use-as-is	<input type="checkbox"/>	Thermoforming	<input type="checkbox"/>	Finishing	<input type="checkbox"/>	Rec/Store/Packaging	<input type="checkbox"/>	Other
	Suspected Unapproved	<input type="checkbox"/>	Large Fab	<input type="checkbox"/>	Composite	<input type="checkbox"/>	Supplier	<input type="checkbox"/>	

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear	General									
	<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Folio/Program	<input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Pressure/Forced					
	<input type="checkbox"/> Centre Not Concentric	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Grain	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Set-up					
	<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damage/Defect	<input type="checkbox"/> Hardware	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Temperature/Cure					
	<input type="checkbox"/> Crimp/Kink/Ripple/Wave	<input type="checkbox"/> Burrs	<input type="checkbox"/> Inspection Incomplete/Unqualified	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Weld					
	<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Moved	<input type="checkbox"/> Wrong Stock Pulled					
	<input type="checkbox"/> Crushing	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misaligned/off center	<input type="checkbox"/> Positioned Wrong	<input type="checkbox"/> Other					
	<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Power Loss/Surge						
	<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Drawing	<input type="checkbox"/> Misread							
	<input type="checkbox"/> Marks/Chatter	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Off-set							
	<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Calibration							
	<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Fit/Function	<input type="checkbox"/> Out of Sequence							

DART AEROSPACE LTD	Work Order:	116946
Description: Gasket	Part Number:	D3566-5
Inspection Dwg: D3566	Rev: C	Page 1 of 1

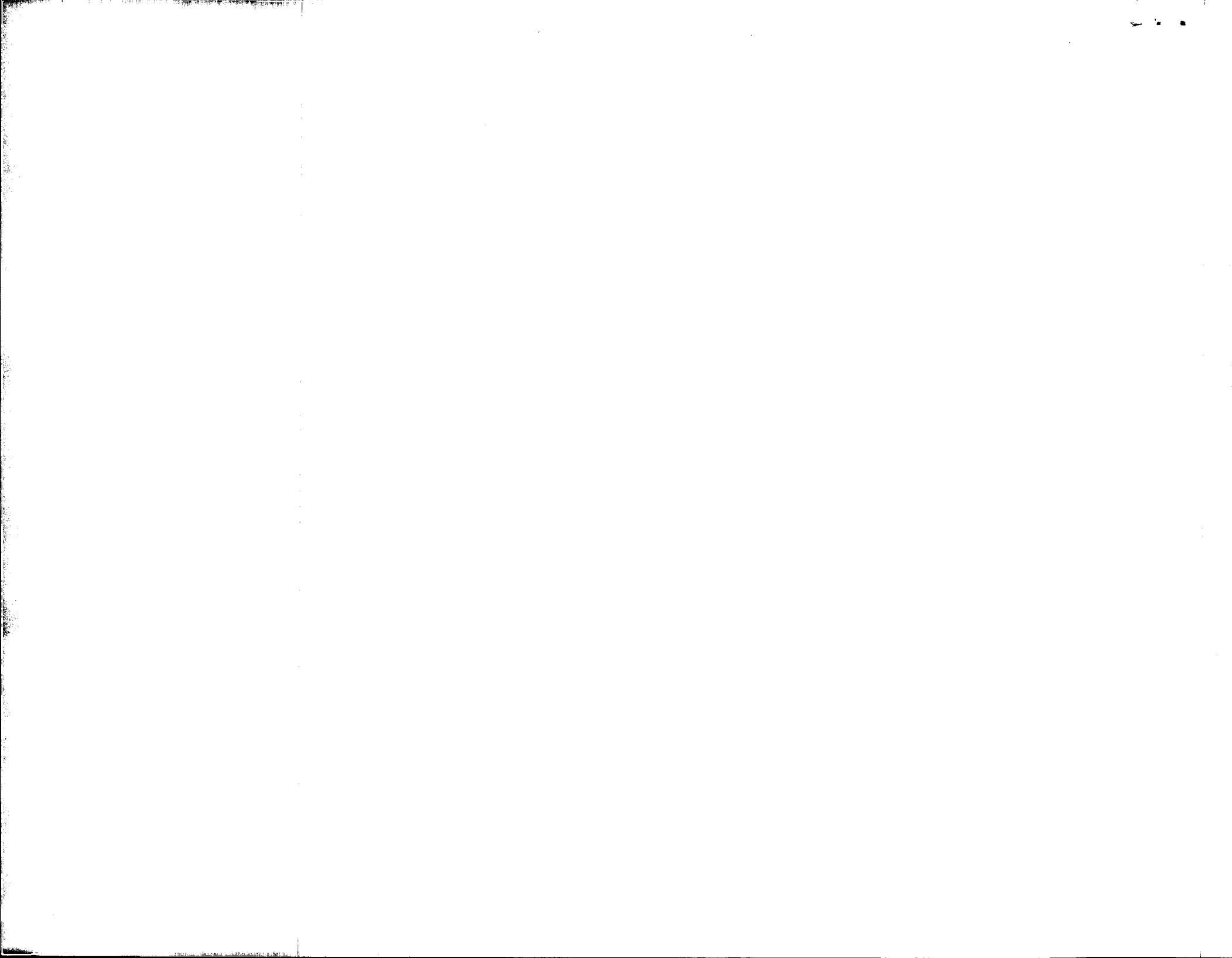
FIRST ARTICLE INSPECTION CHECKLIST

X First Article  Prototype

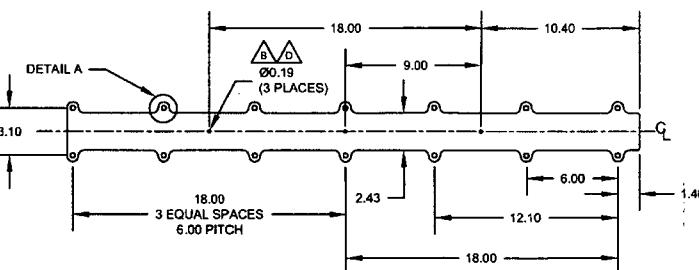
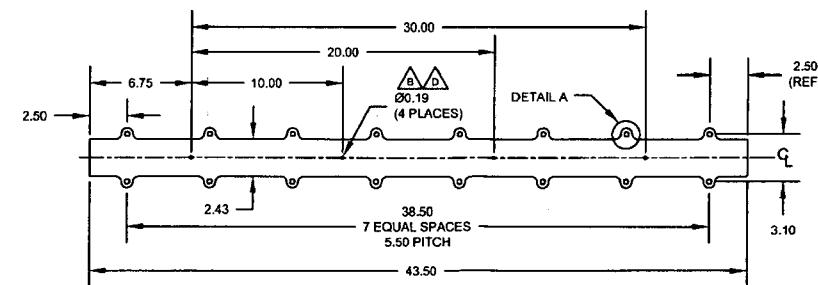
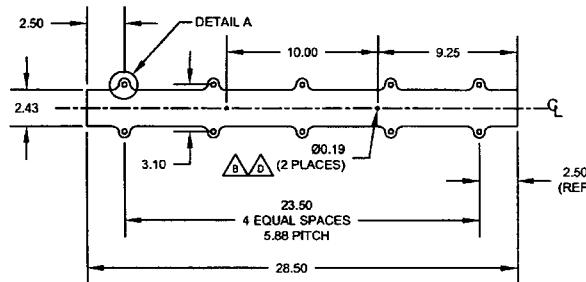
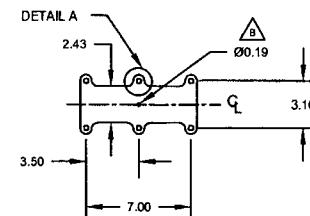
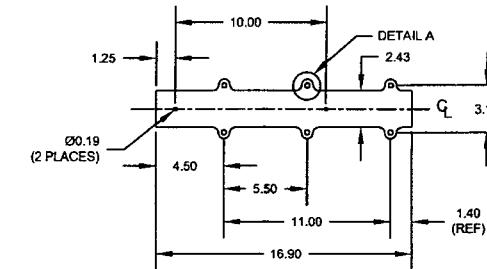
27

Measured by:	JM	Audited by:	9/29	Prototype Approval:	N/A
Date:	14-05-11	Date:	14/5/12	Date:	N/A

Rev	Date	Change	Revised by	Approved
A	07.03.14	New Issue	KJ/JLM	
B	07.07.18	Dimensions updated per Dwg Rev. B	KJ/JLM	
C	07.09.06	Ø0.188 dimension removed	KJ/JLM	
D	08.01.16	Dwg Rev updated	KJ/EC/DDC	AS



8 7 6 5 4 3 2 1

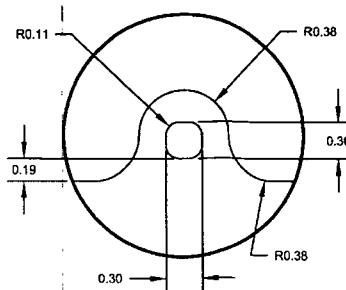
D3566-1 GASKETD3566-5 GASKETD3566-7 GASKETD3566-13 GASKETD3566-15 GASKET

RELEASED
07.08.04

116946 MLJ
1404-25

NOTES:

- 1) MATERIAL: BLACK NEOPRENE SHEET, 1/16 THICK, 60 DUROMETER (REF DART SPEC M-NEO60-S.063)
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: NONE
- 7) WEIGHT: SEE TABLE IN ZONE A3
- 8) PARTS ARE SYMMETRIC ABOUT $\frac{1}{2}$

DETAIL A
SCALE 1:1

WEIGHTS:
 D3566-1 0.29 lbs
 D3566-5 0.36 lbs
 D3566-7 0.24 lbs
 D3566-13 0.07 lbs
 D3566-15 0.15 lbs

8 7 6 5 4 3 2 1

C	UPDATE DRAWING TEMPLATE; CHANGE ALL (TYP X PLS) TO (X PLACES); A8: UPDATE NOTES; A8, B2: ADD D3566-15; A5: INCREASE SIZE OF DETAIL A;	CB	07.08.21
B	ADD DRAIN HOLES	PH	07.04.17
A	NEW ISSUE	PH	06.12.18
REV.	DESCRIPTION	BY	DATE
DESIGN	P	DART AEROSPACE LTD	
DRAWN	C	HAWKESBURY, ONTARIO, CANADA	
CHECKED	P	DRAWING NO.	REV. C
MFG. APPR.	P	D3566	SHEET 1 OF 1
APPROVED	P	TITLE	SCALE
DE APPR.	P	GASKET	1:8
DATE	07.08.21	COPYRIGHT © 2006 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD	